

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>6/17/04</u>		2 Serial/Patent # <u>10/625,754</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	—	5/19/04	\$ 130
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 130
		8 TO BE REFUNDED BY:		
		<input checked="" type="checkbox"/>	Treasury Check	
		<input type="checkbox"/>	Credit Deposit A/C #:	
		9	<div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; text-align: center;"> <div style="display: flex; justify-content: space-around; width: 100%;"> -- </div> </div>	
10 REASON:				
	Overpayment			
	Duplicate Payment			
<input checked="" type="checkbox"/>	No Fee Due (Explanation):			
<i>Notice withdrawn</i>				
11 REFUND REQUESTED BY: <u>C.T. Donnell</u>				
TYPED/PRINTED NAME: <u>C.T. Donnell</u>		TITLE: <u>Pet. Atty</u>		
SIGNATURE: <u>C.T. Donnell</u>		PHONE: <u>306-5589</u>		
OFFICE: <u>4700</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>6/17/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**